

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**DECLARATION AND POWER OF ATTORNEY  
FOR A PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled "STIMULATION METHODOLOGIES AND APPARATUS FOR CONTROL OF BRAIN STATES", the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Sec. 1.56(a).

I hereby state that I do not know and do not believe that the invention was ever known or used in the United States of America before my invention thereof; that to the best of my knowledge and belief the invention has not been in public use or on sale in the United States of America more than one year prior to this application, or patented or described in any printed publication in any country before my invention thereof or more than one year prior to this application, or patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application; and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns.

I hereby appoint Donald R. Schoonover, Reg. No. 34,924, a member of the bar of the State of Missouri, whose postal address is 4211 Rolling Hills Drive, Nixa, Missouri 65714-8771,

telephone (417) 724-2188, facsimile (417) 724-2469, as my attorney, with full power of substitution, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent Office connected therewith in my behalf.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Date: 7/15/03

  
Ivan Osorio

Residence: 4005 W. 124<sup>th</sup> Street, Leawood, Kansas 66209  
Post Office Address: same  
Citizenship: Columbia

Date: 7/15/03

  
Naresh C. Bhavaraju

Residence: 4700 W. 27<sup>th</sup> Street, LL5, Lawrence, Kansas 66047  
Post Office Address: same  
Citizenship: India